Type a plus sign (+) insid	Patent and	Approved for use through 9/30/00 atent and Trademark Office: U.S. DEPARTMENT OF COMMERCE							
PTO/SB/01					Number		1-00074		
(8/96)			First N	lamed Inv	entor	Börje	Rantala		
DECL		COMPLETE IF KNOWN							
	OR	Declaration	Applic	ation Nun	nber				
☐ Submitted with		Submitted af	ter Filing						
Initial Filing		Initial Filing		Art Unit					
				ner Name	9	T	· · · · · · · · · · · · · · · · · · ·		
As a below named invent	or, I hereb	y declare that							
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
MEASURING BLOOD PRESSURE									
(Title of the Invention)									
the specification of which is attached hereto									
OR									
☐ was filed on (MM/DD/	was filed on (MM/DD/YYYY) as United States Application Number or PCT								
International Number and was amended on (MM/DD/YYYY) and was amended on (MM/DD/YYYY)									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign pri							365/h) of any foreign	application(s)	
for patent, inventor's or p									
least one country other t									
any foreign application for patent, inventor's or breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign		untry	Foreign Filin		Priority N	Not	Copy Attac	hed?	
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☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:									
I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.									
Application Numbe	or(s)	Filing Da	ate (MM/DD/Y	YYY)	☐ Appl	lication ed on a prity she	provisional numbers are supplemental set attached		

City

Helsinki

DECLARATION												
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designated the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States of PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.												
U.S. Parent Application PCT P		Parent Number		Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)					
Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact												
all business in the Patent and Trademark Office connected therewith:												
Name			egistration Number	gistration		Name			Registration Number			
Daniel D. Fetter	ley		20,323		Joseph	D. Kubom		40,689				
George H. Solve	son		25,927		Jeffrey S					,686		
Gary A. Essmar			29,376		William	L. Falk			27.	,709		
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Joseph J. Jochn			25,058									
oosepii o. oosiii	1211, 011											
☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.												
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COUNTRY				TELE	PHONE			,	ZIP CODE	53202-4178		
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Zip

State

☐ Additional Inventors are being named on supplemental sheet(s) attached hereto.

FIN-00670

Country

Finland